



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services intranet site (Forms page) for additional instructions.


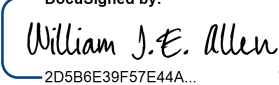
PART I: OVERVIEW			
Department Office/Division/Program:		Department of Transportation – M&O, Region 2	
Department Contract Administrator or Grant Coordinator:		Peter Marcellino	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 22,643.50	Advantage CT / RQS #:	RQS2023110800000000721
CONTRACT	Proposed Start Date:	10/2/2023	Proposed End Date: 12/31/2023
AMENDMENT	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Quality Venture LLC dba Seal Master of New Hampshire P.O. Box 1061 Londonderry, NH 03053 VC0000248332	
Brief Description of Goods/Services/Grant:		Asphaltic Plug Joint repair machine, related materials, and labor.	

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input checked="" type="checkbox"/>	C. Single Source/Unique Vendor	<input type="checkbox"/>	I. Federal Agency Directed
<input type="checkbox"/>	D. Proprietary/Copyright/Patents	<input type="checkbox"/>	J. Willing and Qualified
<input type="checkbox"/>	E. Emergency	<input type="checkbox"/>	K. Client Choice
<input type="checkbox"/>	F. University Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	Specialized equipment, materials, and labor are needed to repair or replace Asphaltic Plug Joints (APJ) on state owned bridges.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	In the past, this vendor has performed work on other Region 2 assets. The vendor owns and operates the specialized equipment that allows for effective, efficient, and safe repair of APJs on state owned bridges.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The rates are fair and reasonable compared to the rates this vendor has charged for work performed in the past. No other vendors have entertained a rental agreement for this piece of equipment.
4. Describe the plan for future competition for the goods or services.	Future competition will be achieved through the competitive bid process for this service.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

PART V: APPROVALS			
The signatures below indicate approval of this procurement request.			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:	William A. Pulver, Chief Operating Officer	Date:	11-8-2023
Signature of DAFS Procurement Official:	DocuSigned by:  2D5B6E39F57E44A...		
Typed Name:	William J.E. Allen	Date:	12/4/2023